VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument State of Alaska

JAN 26 2010

Super	visor/Operator Performing,the Verification Procedure:	DataMaster c			
•	Name B.H. Dubley		ID#_ <i>3532</i>	Date /.2	2.10
A	Name B.H. DubuE7 Agency Wasill P.O.		Pho	ne #	
	Instrument Location Wasilla, AK			-	
В	Alco S/N 75509 Target Va	•	High Pressure	400	
	Alco Test Value Average	2 nd Alco			
	Signature 31.	Dels			CE .
	(O	VER)			/26/10
rensic ka Scie	(Do Not write r being first duly sworn, depose and state as follo Scientist IV at the State of Alaska Scientific Crin entific Crime Detection Laboratory is an entity w fic Director of the State Breath Alcohol Program	me Detection Lal vithin the Departr	boratory. nent of Public	c Safety.	

I, Nita J. Bo

(1) I am a Fo

(2) The Alas

(3) I am the

(4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.

(5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the

verification.

(6) The referenced instrument is certified for evidentiary use in the State of Alaska.

Scientific Director

State Breath Alcohol Program

Subscribed and sworn before me this

Carolyn M. Woland

Notary Public, State of Alaska

Commission Expires with Office

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm breath Test Instrument State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N /30303 (CONTINUED FROM FRONT PAGE) C TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST

ALASKA DEPARTMENT OF PUBLIC SAFETY DATAMASTER cdm 130303

JANUARY 22, 2010 _

OPERATOR'S NAME:

SUPERVISOR

OPERATOR'S NUMBER: 3532

SUBJECT'S LAST NAME:

VERIFICATION OF CAL

SUBJECT'S FIRST NAME/MI :

L

O.L. #: L

DEPT/AGENCY: WAS1

CASE/REPORT:

TEST TYPE: V

ALCO TARGET VALUE: .079

ALCO S/N: 75509

--- BREATH ANALYSIS ---

.079 ADJUSTED FOR 29.54 in ALCO TARGET .078 16:32 BLANK TEST .000 16:33 VERIFIED INTERNAL STANDARD 16:33 ALCO TV 29.54 in .081,/ 16:34 16:34 BLANK TEST .000 SUBJECT SAMPLE .000 16:35 BLANK TEST .000 16:36 ALCO TV 29.54 in .081 16:36 BLANK TEST .000 16:37

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY DATAMASTER cdm 130303 -

JANUARY 22, 2010

TIME 16:29

--- DIAGNOSTIC CHECK ---

COMPUTER:

OKAY

PROGRAM:

OKAY

SOFTWARE DATE:

01/08/09

HEATERS

SAMPLE CHAMBER:

49c

BREATH TUBE:

41c

BAROMETER:

29.54 in

FLOW DETECTOR:

OKAY

PUMP

HIGH SPEED:

OKAY

DETECTOR:

OKAY

FILTERS:

OKAY

QUARTZ STANDARD:

OKAY

CALIBRATION:

OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFG HIJKLMNOPQRSTUVWXYZ[\]^_\abcdefghijklmno pqrstuvwxyz{|}~\0